EXECUTIVE LOBBYING EXPENDITURE REPORT FORM 507						Cart		
- COMPRISE 14			MANAGARA SA			E LOIS	Yest Nagraration No.	
3000			AUGUST 15	9		Manage at the	FOR OFFICE USE ONLY	
COVERING IN	NUARY 1 - DECEMBER 31,2	007	DUE FEBRUARY 1	5		J	Pestmark Date//3//4	
Mail to: the Board of Et OR (<u>8x to:</u> (225)763-8787	hics, 2415 Quail Dr., 3rd Floo or (225)763-8780	or, Baton	Rouge, LA 70808				ELD-(2/100)	
1. Name Han	reil	Ken						
Last		First	 	M	_	×	3070888	
2. Business Address:	1515 Poydras Street, Suit	e 2570	New Orleans	LA	70112	, L		
	Street and No.		City	State	Zíp		200	
Mailing Address	Same as Above							
-	10 012	143	35. [63	%:	500%	-	.	
3. Business Phone	504-587-2213						62	
	Area Code and Telepi	none Num	ber					
4. Total of all execut (Include expendit	ive lobbying expenditures ma ures from Schedules A and B)	de Januar	ry I through June 3	O: \$	0.00	-86	E-103	
5. Total of all execut (When Applicable	ive lobbying expenditures ma e) (luctude expenditures from So	de July 1 hedules /	through December Land B)	31: \$	0.00			
	ive lobbying expenditures ma ne S should equal Line 6)	le durinț	calendar year:	\$_	<u>0.0</u> 0			
7. Did you make an o	expenditure exceeding \$50 on	опе осса	sion for an executi	ve branch	official;			
From January 1	hrough June 307	Yes	П	. 🗹				
	ugh December 31?	Yes		_	NA			
If the answer to c	ither question in Number 7 ab	ove is Yl	is, complete Sched	ule A and	uttach.			
8. Did you make exp	enditures exceeding the sum o	of\$250 fo	or on executive bran	ach offici:	ıl;			
From January 1 th	rough June 30?	Yes		No. IV				
From July 1 through	gh December 317	Yes	□ i	No Z	NA			
If the answer to ei	ther question in Number 8 about the state of	ove is YE	S, complete Schedu	ile A and	attach.			
79 - 40/19/01 - 30/20/20 00/05/46				M	Re:			
Did you expend for officials were level	nds for any reception, social g	athering.	or other function	to will be	The Base	wenty-f	ive executive branch	
Concean were fitty	eer maring may reporting below	a.		on t	hem dh	ad a	eq _{Dao}	
	Yes		No 👿		300,1440	40	ive executive branch ed pages were informatic	
If the gnawer to N	umber 9 above is YES, comple	te Schedi	ule B and attach.				MILION	
Parm 507, Rev.	7/04	F	Page 1 of <u>5</u>					

2)	a. Name of Department and Individual Agency:	
	b. Total of all expenditures made January I through June 30:	S
	c. Total of all expenditures made July 1 through December 31: (When applicable)	s
	d. Total of all expenditures made during the calendar year:	5
3)	a. Name of Department and Individual Agency:	
	b. Total of all expenditures made January 1 through June 30:	S_
	c. Total of all expenditures made July 1 through December 31: (When applicable)	\$
	d. Total of all expenditures made during the calendar year.	\$

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by ISA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Lobbyist